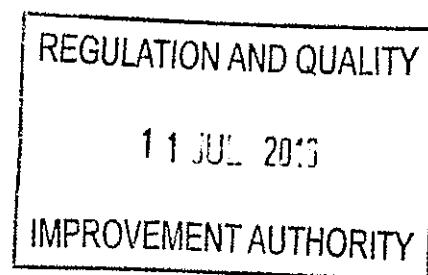


The Regulation and
Quality Improvement
Authority

Inspector: Carmel McKeegan
Inspection ID: IN024154

Moyle Dental Care
RQIA ID: 11612
137 Old Glenarm Road
Larne
BT40 1NH

Tel: 028 2827 3737



**Announced Follow-Up Inspection
of
Moyle Dental Care**

16 February 2016

The Regulation and Quality Improvement Authority
9th Floor Riverside Tower, 5 Lanyon Place, Belfast, BT1 3BT
Tel: 028 9051 7500 Fax: 028 9051 7501 Web: www.rqia.org.uk

1. Summary of Inspection

This announced follow-up inspection of Moyle Dental Care was undertaken by Carmel McKeegan on 16 February 2015 between the hours of 10:30 and 11:15.

The purpose of this inspection was to monitor and ensure that a requirement relating to the log books for the washer disinfectant and the steriliser which was stated for a third and final time during the last care inspection on 16 September 2015, had been addressed.

Discussion with a dental nurse and observation of documentation relating to the decontamination processes evidenced that the requirement has been addressed. Four recommendations were also made during the announced inspection on 16 September 2015. These were not reviewed during this inspection and will be followed up during the next care inspection.

The inspection was facilitated by an experienced dental nurse who was familiar with the decontamination equipment and processes in the dental practice. The registered person, Mr Fergus Lynch was present in the dental practice and was treating patients.

This inspection was underpinned by The Independent Health Care Regulations (Northern Ireland) 2005, The Regulation and Improvement Authority (Independent Health Care) (Fees and Frequency of Inspections) (Amendment) Regulations (Northern Ireland) 2011, and The DHSSPS Minimum Standards for Dental Care and Treatment (2011).

1.1 Actions/Enforcement Taken Following the Last Care Inspection

Other than those actions detailed in the previous QIP there were no further actions required to be taken following the last care inspection on 16 September 2015.

1.2 Actions/Enforcement Resulting from this Inspection

Enforcement action did not result from the findings of this inspection.

1.3 Inspection Outcome

	Requirements	Recommendations
Total number of requirements and recommendations made at this inspection	0	0

This inspection resulted in no requirements or recommendations being made. Findings of the inspection can be found in the main body of the report.

2. Service Details

Registered Organisation/Registered Person: Mr Fergus Lynch	Registered Manager: Mr Fergus Lynch
Person in Charge of the Practice at the Time of Inspection: Mr Fergus Lynch	Date Manager Registered: 10 May 2012
Categories of Care: Independent Hospital (IH) – Dental Treatment	Number of Registered Dental Chairs: 2

3. The Inspection

3.1 Review of Requirements and Recommendations from the Previous Inspection

The previous inspection of the practice was an announced care inspection dated 16 September 2015. The completed QIP was returned and approved by the care inspector.

3.2 Review of Requirements and Recommendations from the last Care Inspection dated 16 September 2015

Last Inspection Statutory Requirements		Validation of Compliance
Requirement 1 Ref: Regulation 15 (2) (b) Stated: Third and final time	<p>The registered person must establish log books for the washer disinfecter and the steriliser used in the decontamination process. Log books should contain the following information:</p> <ul style="list-style-type: none"> • Details of the machine and location • Commissioning report • Daily/weekly test record sheets • Quarterly test record sheets • Annual service/validation certification • Fault history • Process log • Records to show have been trained in the correct use of the machine and • Relevant contacts e.g. service engineer 	Met
	<p>Action taken as confirmed during the inspection: Discussion with the dental nurse and observation of documentation relating to the decontamination processes in the dental practice evidenced that:</p> <ul style="list-style-type: none"> • separate pre-printed log books were 	

	<p>provided for the steriliser and the washer disinfectant</p> <ul style="list-style-type: none"> • review of both logbooks along with discussion with the dental nurse confirmed that all relevant visual checks and daily, weekly and monthly periodic tests had been undertaken and recorded • both log books were up to date and record keeping was to a good standard • an annual validation certificate confirmed that the washer disinfectant and steriliser had been validated on 7 October 2015. The dental nurse confirmed that arrangements were in place for annual revalidation of both machines. • the dental nurse was knowledgeable on how to record should a fault occur in either machine and the relevant contact details of the service engineer were recorded in the logbooks • both logbooks provided all of the information stated within this requirement <p>Significant improvement has been made since the previous inspection, the dental nurse confirmed that the addition of another dental nurse to the practice provides time to ensure the logbooks are kept up to date.</p> <p>This requirement has been met.</p>	
Last Inspection Recommendations		Validation of Compliance
<p>Recommendation 1</p> <p>Ref: Standard 12.4</p> <p>Stated: First time</p>	<p>It is recommended that emergency equipment is provided as recommended by the Resuscitation Council (UK) guidelines to include;</p> <ul style="list-style-type: none"> • a self in-inflating bag with reservoir suitable for a child; and • clear oxygen face masks in adult and child sizes. <p>Action taken as confirmed during the inspection: This recommendation will be reviewed during the next care inspection.</p>	<p>Not reviewed</p>

<p>Recommendation 2</p> <p>Ref: Standard 12.4</p> <p>Stated: First time</p>	<p>It is recommended that advice and guidance should be sought from your medico-legal advisor in relation to the provision of an automated external defibrillator (AED) in the practice. Any recommendations made should be addressed.</p> <p>Action taken as confirmed during the inspection: This recommendation will be reviewed during the next care inspection.</p>	<p>Not reviewed</p>
<p>Recommendation 3</p> <p>Ref: Standard 12</p> <p>Stated: First time</p>	<p>It is recommended that a written policy for the management of medical emergencies reflective of best practice guidance is developed to include:</p> <ul style="list-style-type: none"> • arrangements for mandatory training; • provision of equipment; • list emergency medication to be retained; • emergency equipment and emergency medication checking procedures; • how to summon help; • incident documentation and • staff debriefing <p>Action taken as confirmed during the inspection: This recommendation will be reviewed during the next care inspection.</p>	<p>Not reviewed</p>
<p>Recommendation 4</p> <p>Ref: Standard 11.1</p> <p>Stated: First time</p>	<p>It is recommended that a recruitment and selection policy and procedures are developed to reflect best practice guidance to include;</p> <ul style="list-style-type: none"> • the recruitment process, application process, shortlisting, interview and selection; issuing of job description and contract of employment; employment checks; references; employment history; Access NI check; confirmation that the person is physically and mentally fit ; verification of qualifications and registration with professional bodies and include a criminal conviction declaration by the applicant. <p>Action taken as confirmed during the inspection: This recommendation will be reviewed during the next care inspection.</p>	<p>Not reviewed</p>

No requirements or recommendations resulted from this inspection.

I agree with the content of the report.			
Registered Manager		Date Completed	
Registered Person	<i>J. V. Lynch</i>	Date Approved	8/6/16
RQIA Inspector Assessing Response	<i>Carmel McKeegan</i>	Date Approved	15.7.16.

Please provide any additional comments or observations you may wish to make below:

Please ensure this document is completed in full and returned to RQIA's office from the authorised email address

It should be noted that this inspection report should not be regarded as a comprehensive review of all strengths and weaknesses that exist in the practice. The findings set out are only those which came to the attention of RQIA during the course of this inspection. The findings contained within this report do not absolve the registered person(s) from their responsibility for maintaining compliance with minimum standards and regulations.